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# UNITED STATES BANKRUPTCY COURT MIDDLE DISTRICT OF NORTH CAROLINA

IN RE:

KEVIN WINSLOW CLARK KATRINA KING CLARK 5059 NORTH NC HWY 87 GIBSONVILLE, NC 27249 CASE NO. 20-10646 JUDGE BENJAMIN A. KAHN

**DEBTORS** 

SSN(1) XXX-XX-5276

SSN(2) XXX-XX-6734

DATE: 05/20/2021

#### REPORT OF FILED CLAIMS

Pursuant to 11 U.S.C. §704(5), the trustee has examined the proofs of claims filed in this case and objected to the allowance of such claims as appeared to be improper except where no purpose would have been served by such objection. After such examination and objections, if any, the trustee states that claims should be deemed allowed or "not filed" as indicated below.

NAME & ADDRESS OF CREDITOR	AMOUNT	CLASSIFICATION
ACCEPTANCE NOW	\$0.00	(U) UNSECURED
ATTN OFFICER/MANAGING AGENT	INT: .00%	NOT FILED
5501 HEADQUARTERS DR	NAME ID: 173175	ACCT:
PLANO, TX 75024	CLAIM #: 0017	COMMENT:
AHB REALITY	\$0.00	(U) UNSECURED
1603 S CHURCH ST	INT: .00%	NOT FILED
BURLINGTON, NC 27215	NAME ID: 182913	ACCT:
	CLAIM #: 0030	COMMENT:
ALAMANCE CO REGISTER OF DEEDS	\$52.00	(Z) SPECIAL COST ITEM
P O BOX 837	INT: .00%	
GRAHAM, NC 27253	NAME ID: 1735	
	CLAIM #: 0034	COMMENT:
ALAMANCE COUNTY TAX	\$14.87	(P) PRIORITY
124 W ELM STREET	INT: .00%	
GRAHAM, NC 27253	NAME ID: 2794	
	CLAIM #: 0001	COMMENT: OC,321OR
ALAMANCE COUNTY TAX	\$9.73	(U) UNSECURED
124 W ELM STREET	INT: .00%	
GRAHAM, NC 27253	NAME ID: 2794	ACCT: 0646
	CLAIM #: 0038	COMMENT: 321OR
AMERICAN EXPRESS NATIONAL BANK	\$2,701.67	(U) UNSECURED
% BECKET & LEE LLP	INT: .00%	
P O BOX 3001	NAME ID: 170495	
MALVERN, PA 19355	CLAIM #: 0018	COMMENT:
BULLCITY FINANCIAL SOLUTIONS	\$0.00	(U) UNSECURED
2609 N DUKE ST STE 500	INT: .00%	NOT FILED
DURHAM, NC 27704	NAME ID: 154946	ACCT:
	CLAIM #: 0019	COMMENT:
CITY OF BURLINGTON	\$0.00	
TAX COLLECTOR	INT: .00%	
P O BOX 1358	NAME ID: 2914	
BURLINGTON, NC 27216	CLAIM #: 0004	COMMENT: OC

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NAME & ADDRESS OF CREDITOR	AMOUNT	CLASSIFICATION
COMENITY BANK	\$0.00	(U) UNSECURED
BANKRUPTCY DEPT	INT: .00%	NOT FILED
P O BOX 182125	NAME ID: 169851	ACCT:
COLUMBUS, OH 43218-2125	CLAIM #: 0020	COMMENT: LANE BRYANT
COMENITY BANK	\$0.00	
BANKRUPTCY DEPT	INT: .00%	
P O BOX 182125	NAME ID: 169851	
COLUMBUS, OH 43218-2125	CLAIM #: 0021	COMMENT: TORRID
CONE HEALTH	\$0.00	
1200 N ELM ST	INT: .00%	
GREENSBORO, NC 27401	NAME ID: 137686	
	CLAIM #: 0022	COMMENT:
CONN APPLIANCES INC	\$1,458.56	(U) UNSECURED
% BECKET & LEE LLP	INT: .00%	L COTT. OCAA
P O BOX 3002	NAME ID: 169961	
MALVERN, PA 19355	CLAIM #: 0010	COMMENT:
CPI SECURITY SYSTEMS	\$0.00	
4200 SANDY PORTER RD	INT: .00%	
CHARLOTTE, NC 28273	NAME ID: 70717	ACCT:
	CLAIM #: 0023	COMMENT:
CREDIT FINANCIAL SERVICES	\$0.00	· /
3710 UNIVERSITY DR STE 218	INT: .00%	
DURHAM, NC 27707	NAME ID: 155403	ACCT:
	CLAIM #: 0024	COMMENT:
EXETER FINANCE LLC	\$1,347.19	(U) UNSECURED
P O BOX 650693	INT: .00%	1. C. C. T
DALLAS, TX 75265	NAME ID: 180109	ACCT: 1200
	CLAIM #: 0025	COMMENT:
FIRST POINT RESOURCES	\$0.00	
P O BOX 26140	INT: .00%	
GREENSBORO, NC 27402	NAME ID: 38570 CLAIM #: 0026	ACCT: CCTS COMMENT:
HILTON GRAND VACATIONS	\$0.00	(S) SECURED
ATTN OFFICER	INT: .00%	NOT FILED
6355 METROWEST BLVD STE 180	NAME ID: 182908 CLAIM #: 0011	ACCT: COMMENT: OC
ORLANDO, FL 32835		
HILTON GRAND VACATIONS	\$0.00	
ATTN OFFICER	INT: .00%	NOT FILED
6355 METROWEST BLVD STE 180	NAME ID: 182914 CLAIM #: 0014	ACCT: COMMENT: OC
ORLANDO, FL 32835		
IC SYSTEM INC	\$0.00	(U) UNSECURED
444 HWY 96 E	INT: .00%	NOT FILED
P O BOX 64437 ST BALL MN 55164 0437	NAME ID: 8408	ACCT: COMMENT:
ST PAUL, MN 55164-0437	CLAIM #: 0027	
INTERNAL REVENUE SERVICE	\$0.00	(P) PRIORITY
P O BOX 7346	INT: .00%	NOT FILED
PHILADELPHIA, PA 19101-7346	NAME ID: 123770 CLAIM #: 0002	ACCT: 5276 COMMENT: OC
	CLAIIVI π. 0002	COMMENT. OC

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NAME & ADDRESS OF CREDITOR	AMOUNT	CLASSIFICATION
LAKEVIEW LOAN SERVICING LLC % LOANCARE LLC	MONTHLY PMT \$1,410.96 INT: .00%	(H) ONGOING-SECURED
P O BOX 8068	NAME ID: 174219	ACCT: 9390
VIRGINIA BEACH, VA 23450	CLAIM #: 0005	COMMENT: DT,RE RP,CTD,EFF DEC20
LAKEVIEW LOAN SERVICING LLC	\$5,643.84	(H1) POST-PETITION ARREARAGE-SECURE
% LOANCARE LLC P O BOX 8068	INT: .00% NAME ID: 174219	ACCT: 9390
VIRGINIA BEACH, VA 23450	CLAIM #: 0006	COMMENT: ARR,AUG THRU NOV 20
LAKEVIEW LOAN SERVICING LLC	\$32,606.20	(H3) PRE-PETITION ARREARAGE-SECURED
% LOANCARE LLC	INT: .00%	
POBOX 8068	NAME ID: 174219	ACCT: 9390
VIRGINIA BEACH, VA 23450	CLAIM #: 0007	COMMENT: ARR THRU JUL 20
LAKEVIEW LOAN SERVICING LLC % LOANCARE LLC	\$250.00 INT: .00%	(H2) POST-PETITION FEES-SECURED
P O BOX 8068	NAME ID: 174219	ACCT: 9390
VIRGINIA BEACH, VA 23450	CLAIM #: 0037	COMMENT: POST PET FEES
N C DEPARTMENT OF REVENUE	\$0.00	(P) PRIORITY
BANKRUPTCY UNIT	INT: .00%	NOT FILED
P O BOX 1168	NAME ID: 9699 CLAIM #: 0003	ACCT: 5276 COMMENT: OC
RALEIGH, NC 27602-1168		
REGIONAL MANAGEMENT CORP 979 BATESVILLE RD STE B	\$1,941.52 INT: .00%	(U) UNSECURED
GREER, SC 29651	NAME ID: 162250	ACCT: 8625
51E21, 50 <b>2</b> 7001	CLAIM #: 0013	COMMENT:
S&B FINANCIAL GROUP	\$0.00	
ATTN MANAGING AGENT/OFFICER	INT: .00%	NOT FILED
5925 FARM POND RD	NAME ID: 182909 CLAIM #: 0008	ACCT: COMMENT: OC
APEX, NC 27523		
SANTANDER CONSUMER USA P O BOX 560284	\$9,833.00 INT: 5.25%	(V) VEHICLE-SECURED
DALLAS, TX 75356-0284	NAME ID: 45498	ACCT: 5836
,	CLAIM #: 0009	COMMENT: 13FORD
SANTANDER CONSUMER USA	\$11,341.32	(U) UNSECURED
P O BOX 560284	INT: .00% NAME ID: 45498	ACCT: 5836
DALLAS, TX 75356-0284	CLAIM #: 0016	COMMENT: SPLIT
TRULIANT FEDERAL CREDIT UNION	\$1,665.68	(U) UNSECURED
P O BOX 25132	INT: .00%	
WINSTON SALEM, NC 27114	NAME ID: 66723	ACCT: 3406
	CLAIM #: 0028	COMMENT: 521OR
UNC DBA DURHAM FAMILY PRACTICE	\$0.00	(U) UNSECURED
2400 BROAD ST STE 1 DURHAM, NC 27704	INT: .00% NAME ID: 182912	NOT FILED ACCT:
DOMINI, NC 27707	CLAIM #: 0029	COMMENT:
UNC HEALTHCARE	\$11,238.55	(U) UNSECURED
P O BOX 1123	INT: .00%	
MINNEAPOLIS, MN 55440-1123	NAME ID: 170446	ACCT: 6734
	CLAIM #: 0033	COMMENT:

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\$0.00 INT: .00% NAME ID: 144311 CLAIM #: 0031 \$580.15 INT: .00% NAME ID: 144311 CLAIM #: 0032 \$1,215.05 INT: .00% NAME ID: 182990 CLAIM #: 0035	(S) SECURED SURRENDERED ACCT: 1722 COMMENT: OC,VACUUM,REL  (U) UNSECURED  ACCT: 1722 COMMENT: SPLIT  (U) UNSECURED  ACCT: 1138
NAME ID: 144311 CLAIM #: 0031 \$580.15 INT: .00% NAME ID: 144311 CLAIM #: 0032 \$1,215.05 INT: .00% NAME ID: 182990	SURRENDERED ACCT: 1722 COMMENT: OC,VACUUM,REL  (U) UNSECURED  ACCT: 1722 COMMENT: SPLIT  (U) UNSECURED
CLAIM #: 0031  \$580.15  INT: .00%  NAME ID: 144311  CLAIM #: 0032  \$1,215.05  INT: .00%  NAME ID: 182990	COMMENT: OC, VACUUM, REL  (U) UNSECURED  ACCT: 1722 COMMENT: SPLIT  (U) UNSECURED
\$580.15 INT: .00% NAME ID: 144311 CLAIM #: 0032 \$1,215.05 INT: .00% NAME ID: 182990	(U) UNSECURED  ACCT: 1722 COMMENT: SPLIT  (U) UNSECURED
INT: .00% NAME ID: 144311 CLAIM #: 0032  \$1,215.05 INT: .00% NAME ID: 182990	ACCT: 1722 COMMENT: SPLIT (U) UNSECURED
NAME ID: 144311 CLAIM #: 0032 \$1,215.05 INT: .00% NAME ID: 182990	COMMENT: SPLIT  (U) UNSECURED
CLAIM #: 0032 \$1,215.05 INT: .00% NAME ID: 182990	COMMENT: SPLIT  (U) UNSECURED
\$1,215.05 INT: .00% NAME ID: 182990	(U) UNSECURED
INT: .00% NAME ID: 182990	
NAME ID: 182990	ACCT: 1138
	ACCT: 1138
CLAIM #: 0035	
	COMMENT:
\$81.73	(U) UNSECURED
INT: .00%	
NAME ID: 182990	ACCT: 0002
CLAIM #: 0036	COMMENT:
\$0.00	
INT: .00%	NOT FILED
NAME ID: 182910	ACCT:
CLAIM #: 0012	COMMENT: OC
\$0.00	
NAME ID: 182910	ACCT:
CLAIM #: 0015	COMMENT: OC
\$83,392.02	
\$4,500.00	ATTORNEY FEE
	INT: .00% NAME ID: 182990 CLAIM #: 0036  \$0.00 INT: .00% NAME ID: 182910 CLAIM #: 0012  \$0.00 INT: .00% NAME ID: 182910 CLAIM #: 0015  \$83,392.02

ANITA JO KINLAW TROXLER, TRUSTEE 500 W FRIENDLY AVE STE 200 P O BOX 1720 GREENSBORO, NC 27402-1720

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#### NOTICE OF FILING OF REPORT OF FILED CLAIMS

The foregoing Report of Filed Claims has been filed with the Bankruptcy Court based on an audit of claims filed in the Trustee's office. The claims are allowed unless objection is made by the Debtors or other party in interest.

Any objection to a claim should be filed in writing with the Bankruptcy Court at the address below and a copy must be served on the Trustee:

Clerk, U.S. Bankruptcy Court 101 S. Edgeworth Street P.O. Box 26100 Greensboro, NC 27420-6100

If an objection is filed, a hearing will be scheduled before the Court. The Trustee will continue making disbursements on the claims unless an objection is filed.

Date: 05/20/2021 OFFICE OF THE CHAPTER 13 TRUSTEE

By: /s/ Gayle McFarland Clerk Chapter 13 Office 500 W FRIENDLY AVE STE 200 P O BOX 1720 GREENSBORO, NC 27402-1720

cc: Debtors

Attorney for Debtors - Electronic Notice